

MHSOAC
Mental Health Services Oversight and Accountability Commission
Commission Meeting Minutes
Thursday, September 25, 2008

Courtyard Marriott Hotel
4422 Y Street
Sacramento, California 95817

I. Call to Order

Chair Gayle called the meeting to order at 9:10 a.m.

II. Roll Call

Commissioners in attendance: Linford Gayle, Chair; Andrew Poat, Vice-Chair; Darlene Prettyman, Bill Kolender, Eduardo Vega, David Pating, Larry Poaster, Larry Trujillo, Tom Green, Beth Gould, Wesley Chesbro, Patrick Henning, Howard Kahn

Not in attendance: Mark Ridley-Thomas, Mary Hayashi, Richard Bray

Vice Chair Poat indicated that the Commissioner names on the roll call list need to be updated to include new Commissioners Howard Kahn and Richard Bray, and remove former Commissioner Saul Feldman.

Thirteen members were present and a quorum was established.

Chair Gayle recognized new Commissioner Howard Kahn and welcomed him to his first official Commission meeting. The Commissioners identified themselves and what sector they represent on the Commission.

Vice Chair Poat suggested that Saul Feldman be recognized for his tenure on the Commission at a future meeting, possibly at the November meeting in Sacramento.

III. Minutes from July 24, 2008

Beverly Whitcomb noted that the minutes from the July 24, 2008, Commission meeting is unavailable due to the Governor's Executive Order that terminated all contractors. Peter Shorthand is the contractor who tapes and transcribes all Commission meetings and will make the minutes available when the budget is signed and contractors are able to resume their activities. Marsha Tagawa and Matthew Lieberman, OAC staff, will be taking minutes for today's meeting.

IV. Motions Summary

Commissioner Prettyman moved to accept the motions, seconded by Vice Chair Poat. The Motions Summary carries.

V. Update on MHSA Evaluation Activities

This presentation was taken out of order on the agenda as Dr. Pating was delayed by traffic and was unavailable for the presentation on the Co-Occurring Disorders Report at the designated time.

Larry Poaster, Chair, Evaluation Committee (formerly the Measurements and Outcomes Technical Resource Group), indicated that the Committee adopted the concept paper that was borne from the work by the Measurements and Outcomes TRG. In February 2008, the workplan was adopted. In April, former Commissioner Saul Feldman (former Chair of the Committee with Commissioner Poaster) and Commissioner Poaster drafted a policy paper that was revised and presented to the Commission in May 2008.

The evaluation will be divided into three phases. The first issue, after discussions and adoption by the Commission, was how, in the short and long term, could “things” get going. It was determined that an evaluation report was needed. Discussions with Dr. Mayberg took place to determine salary savings as a way of initiating Phase I. An agreement was entered into with Dr. Mayberg to use unspent dollars to develop Phase I.

Phase I is being construed as hiring individuals with expertise to: help scope out how the full evaluation should be designed; identify constraints; help workgroup with the guidelines; work with constituency, etc. The product needs to reflect the view of many constituency groups. This person will help develop an RFP and determine costs. The selected person for Phase I will not be part of Phase II.

The Evaluation Committee met yesterday regarding the need for the project and how things are viewed. The steering committee will work with the OAC and the contractor.

Phase II is the comprehensive evaluation of all components. A BCP for FY 2009/10 was forwarded for approval to fund the full project. There are dollars available. The intent is to issue an RFP to contract with a group to complete Phase I. However, feasibility will have to be researched because of the Governor’s Executive Order that limits hiring contractors. The Executive Order will remain in place until the end of FY 2008/09. Exemptions will be submitted.

The evaluation is a synthesized project. We need to look at how things have gone in the last five years of the MHSA (long and short-term things), and, we need to look at what has happened in the last two years.

Phase III is the beginning of the planning stage for the next report that includes lessons learned, and what system changes are working.

Comments/Questions

Commissioner Trujillo indicated that he may have missed the connector between the person in Phase I who will assist in the RFP. Is this person a consultant? Possibly.

Vice Chair Poat thanked Commissioner Poaster for taking on this huge project and that a three-phase approach is the right track. The evaluation was important to assure taxpayers that their money is being well spent. He indicated that it is not just a report card, but the laying out of key questions of the goal(s) of the OAC to see how it transforms the whole system. It will leverage opportunities to raise questions that a consultant may not have. It is viewed as a policy angle to ask questions regarding the MHSA and health care. This is a central role of the OAC. He hopes this will be a good platform.

Commissioner Chesbro said the evaluation needs to be defensible and objective and that the Legislature will look at the evaluation. If the committee comes under scrutiny, the OAC must present credibility. Commissioner Poaster indicated that a third party will be conducting the evaluation.

Commissioner Vega stated that as the project becomes developed, he would like to see real life differences (e.g., homelessness, etc.), not just bricks. The evaluation must measure the difference made in people's lives. Commissioner Chesbro, in response, indicated that there is a difference between a qualitative and a quantitative analysis. The numbers are not as important as how lives are affected.

Commissioner Poaster is in discussions with DMH to work collaboratively on the project, with OAC as the lead.

VI. Co-Occurring Disorders Work Group Report

Commissioners Gould and Pating are the co-chairs of this committee. Sheri Whitt, Executive Director, OAC, commented that this committee did an excellent job of reaching out to those in the community, and that what the committee is bringing forth is a comprehensive report.

Commissioner Gould welcomed new Commissioner Kahn and explained some of her personal experiences and how she asked to be on the Co-Occurring Disorders Workgroup. She further explained that this workgroup met eight or nine months ago and continued where the previous workgroup left off. They captured all ongoing questions and put together best practices and presented it to the Commission to see how they can continue. There were many presenters during the past meetings. They didn't want to duplicate efforts but wanted to preserve best practices. The global position is to develop a strategic plan as a blueprint. The COD Recommendation in the report is: "The MHSOAC should promote 'Co-occurring Disorders Competency' as a core value in implementation of the MHSA and this value should be reflected in the Commission's annual Strategic Plan."

Commissioner Pating indicated that his role is to present an overview of the Report. He said it was a “labor of love” for him. His three loves included: #1 Commissioner Gould, #2 the Act, and #3 Matt Lieberman.

Summary: The Report was renamed “Transforming the Mental Health System Through Integration.” By adopting the core value, the MHSOAC provides policy direction that facilitates the achievement 10 key goals necessary to improve the treatment of co-occurring disorders as well as transforming the mental health system in California.

- #1 – Need to look at both “I’s” – little “i” and big “I”
- #2 – Focus on population-based problems; need to listen to clients
- #3 – Develop partnerships (ADP, DMH, etc.)
- #4 – Provide training – WET and behavioral health competency
- #5 – Continuum of care
- #6 – Peer-based services
- #7 – Strengthen families and help them get services
- #8 – Trauma is ubiquitous in our society
- #9 – Better data collection to measure progress toward systemic transformation and COD competency
- #10 – Use incentives to recognize and encourage processes at the county level

Use the strength-based, no-blame approach

Commissioner Gould - speaking as a parent/public policy person, where to go for services or what programs are available is unclear. Integration of services needs to happen.

Questions

Commissioner Vega – central to integration of services is the cultural issue. There are a vast number of different cultures of people working in the system. It is a bifurcated system where substance abuse is not co-mingled with other agencies. How do we reduce stigma within the two systems (mental health and substance abuse)? There is a prevalence of cultural mistrust between the provider and the client in the mental health and substance abuse communities. How can we bring the provider and consumer together?

Commissioner Pating responded with a question – we find the problem, shake hands, then what? He proceeded to thank former Commissioner Calvin Lee for his insight regarding what is needed in the schools. There needs to be a way to frame training for teachers so they understand that mental health affects attendance. How can WET dollars be used as part of the funding for this problem? The answers lie in stigma reduction, strategic partnerships with the schools and the criminal justice system. Commissioner Pating is very interested in working with Commissioner Vega to develop something that will address reducing disparities.

Commissioner Prettyman commented that on an early Tuesday morning, would an individual know where to go for services? Most critical cases occur on weekends, after 5:00 p.m. The COD can include the SMI or first tier. Congratulations!!!

Vice Chair Poat stated that this builds a case for better care and is an excellent framework for strengths. Question: in reference to a state COD plan, is this an actual strategy, and is it an aggressive strategy?

Commissioner Pating – in 2003, COD was recognized nationally. COJAC through ADP is writing a second plan that is being revised.

Sandra Naylor-Goodwin indicated that COJAC has a plan but is having difficulties getting the recommendations implemented.

Vice Chair Poat recently traveled to Washington, D.C. and met with the Director of HHSA. There is a need to have proposals in place that can set the framework so California can have waivers to overcome Medicaid barriers.

Commissioner Trujillo expressed his appreciation and congratulations and complemented the integration concepts in the COD report.

Commissioner Chesbro stated that change does not come from the top. People must be engaged who provide services in order to change culture.

Commissioner Pating – we need to think about a decentralized way of doing business. Living it has a different way of approaching recommendations which leads to a diverse group.

Commissioner Henning offered his congratulations. Integration is the focus. Barriers must be removed – we cannot start and stop change. There is a need to show the administration that the start and stop process does not work. There may be 100,000 people working in the mental health field.

Commissioner Kolender added his congratulations as well. Los Angeles County has the most “wrong doors” in California. There needs to be a combination of integration and collaboration.

Public Comment

- Delphine Brody with the California Network of Mental Health Clients, enjoyed working with Commissioners Pating and Gould. The focus of including TAY and integrating services for youth is very important. Trauma focus and client centered services are critical. There are specific issues that can be better developed – Peer involvement. It provides the ability to foster and teach others – peers can teach peers. Expand the role of peers in 6.3 of the report to include consumer managers.

- Sandra Duval representing the UACF often said there is no “right door” because treatment centers will not take people either because they are mentally ill or they are substance abusers.
- Arnulfo Medina from REMHDCO appreciates the work with TAY and the homeless population. Cayenne offers support as well. What is missing is the inclusion of data that speaks to racial and ethnic disparity. Cultural competence is a core value and it is missing. Must ensure that it is included. Recommendation: cultural competence review before it moves forward.
- Carmen Diaz inquired about the indigent. Can waivers be obtained for matching funds for Medi-Cal? The unserved are the indigent.
- Stacie Hiramoto from REMHDCO offered her congratulations and included the client and family members. Ms. Hiramoto sits on the OAC Cultural and Linguistic Competence Committee. She stated that the report does not reduce disparities to the underserved communities, TAY, veterans, or older adults, and has nothing for the racial/ethnic communities.
- Sandra Naylor Goodwin, CIMH, stated that the problem is a lack of resources to move forward. Members of COJAC think a waiver is a good idea. There is no statewide COD technical assistance center. There is no way to disseminate information. SAMSHA will grant \$340,000 toward providing technical assistance with ADP and CMHDA. We need to look at priorities and to look for how we can leverage for additional funding. But, at least we are moving in the right direction.
- Dede Ranahan of NAMI thanked all who worked on the report. She would like an expansion of the sections on trauma, wellness and family members, and to focus on helping families who support the family member who is ill – in other words, treat the whole family. She suggested editing 2.4 housing to include who are at risk of homeless (a handout will be included in the next rewrite).
- Stephanie Welch, CMHDA, wants to stay involved with the report. Counties will identify priorities and report the recommendations at the October OAC meeting.
- Patty Gaynor, local client advocate. “WOW” OAC has come a long way. The report is the mantra of the client movement. Need more oversight of cultural competence. On the last page, if CBO’s are used to get input from clients, that’s a good thing.
- Paula Campinelli, Wellness Listing, applauds integration. Great family and client leadership. The integration for wellness is a good thing. Recommendation: Decide how to be different and how to get there.

VII. Recognition of Sally Zinman

Commissioner Chesbro presented Sally Zinman with an Assembly Resolution honoring her many years as a pioneer of the consumer movement in California. He described Ms. Zinman as a role model who was enormously instrumental in transforming the movement and likened her to Mahatma Ghandi, Harriet Tubman, and others who came before her. She has spent over 30 years of advocacy and self-help and dedicated over 10 years as the Executive Director of the California Network for Mental Health. "People with lived experiences" with a mental illness have benefitted from the transformation of the system.

Ms. Zinman spoke of her personal experiences and thanked everyone for their contribution along the way.

Pat Ryan and Stephanie Welch, CMHDA, voiced their accolades.

Chair Gayle called Ms. Zinman "my hero" and silent strength. It is because of Sally that I sit before you today as the Chair of the OAC.

VIII. ACTION ITEM: Consent Agenda

Ann Collentine, Supervisor, Plan Review and Statewide Projects Unit, presented the four PEI plans (Glenn, Modoc, San Bernardino, and Solano counties) that are recommended for approval by the Commission.

Comments/Questions

Commissioner Henning stated that he would like to see a common strength(s) (trends for best practice) for all of the PEI plans on the summary.

Vice Chair Poat inquired as to what is the process from the county to the state. Ann explained the 30-day review process and added that prior to submission to the state, many counties submit their plans for approval to their county's Board of Supervisor. Vice Chair Poat agreed that it should pass before the county's Board of Supervisor first.

Public Comment

- Sandra Duval, UACF, indicated that the plans for parenting classes are not a substitute for help to a child. It is not an intervention for a child's needs.
- Rocco Cheng indicated that the review process was doing a good job and that the community outreach and engagement was good. Would like to see more outreach to the underserved community. Need more people on the review team.

Motion: Motion was made by Vice Chair Poat and seconded by Commissioner Kolender. The PEI plans were unanimously approved. Motion carries.

XI. PEI Statewide Projects

Beverly Whitcomb, Mental Health Program Administrator, Barbara Marquez, Acting Chief, DMH, Prevention and Early Intervention Branch, and Carol Hood, Assistant Deputy Director, DMH, Community Program Development, presented an update on the PEI statewide projects.

Three of the five statewide projects for PEI are discussed in this presentation: Suicide Prevention, Student Mental Health Initiative, and Stigma and Discrimination. May 2008, OAC approved DMH to administer Stigma and Discrimination Reduction, Suicide Prevention and the SMHI; July 2008 OAC approved the movement of \$6 million/yr. for four years to the counties for the purpose of Statewide Training and Technical Assistance and Capacity Building for PEI. The fifth program Racial, Ethnic and Cultural Programs are reducing disparities are new and was just introduced at yesterday's CLC committee and additional information will be provided at the September 30, 2008, statewide stakeholders conference call.

Commissioner Henning inquired as to where MHSA supported activities have stopped or slowed? He acknowledged that DMH contractors have been significantly impacted and cited the OAC's loss of our student assistants as well as Cynthia Craft, Communications Chief.

Commissioner Kahn asked if the OAC has taken action or a position? Can the Commissioners be more proactive by collectively signing and sending a letter requesting exemptions. Pat Ryan, CMHDA, indicated that CMHDA and DMH and other organizations funded through MHSA are drafting a letter of exemption. Sheri Whitt asked if the OAC can be a part of the letter. Pat responded affirmatively.

Shannon Chambers, Deputy Attorney General, council to the Commission, indicated that data is needed to support the exemption, and submit to the Commission then act/decide. However, should be on the "fast track."

Motion: Motion was made by Commissioner Chesbro to delegate authority to the Executive Director to draft a letter for the Chair's signature to request HHSA programs be exempt. Commissioner Kahn seconded the motion. The motion was unanimously carried.

Commissioner Poaster asked if we would lose the contractors. Carol Hood indicated absolutely that many non-profits will not be able to sustain any long term amount of time with a loss of revenue. Sheri Whitt commented and named many of our contractors who have been impacted. Commissioner Chesbro indicated that he believes the Governor's intent is to save money for the State General Fund and that the stop work order for the MHSA would not help.

Commissioner Henning asked for a list of programs affected by the budget cut from the Executive Director.

Carol Hood: These projects are being developed in the context of the offices of the DMH. Due to the extension of the Governor's Executive Order to the end of the current fiscal year that will not allow contractors, retired annuitants and student assistants, some of the activities are on hold. Exemptions will be submitted in order to resume activities.

Barbara Marquez:

- ✓ the Suicide Prevention Plan is complete, and will work with organizations regarding available resources
- ✓ Student Mental Health Initiative – an RFA is being put out and there is a possibility for system-wide grants. There will also be data sharing on campuses and between campuses. There will be K-12 campus-based programs and will also work with the California state and University of California systems. Contracts might go forward with public entities.
- ✓ Stigma and Discrimination – a meeting facilitator has been hired to develop a Strategic Plan (June 2009)

Commissioner Vega – what is the current status of the plan since there are no contractors? Carol Hood responded that they are seeking exemptions, and the guidelines for the Training and Technical Assistance are being developed. Training & Technical Assistance has available \$6 million over four years for a total of \$24 million and will be administered by the counties. Information Notice will be released in the next week or so, and will be administered by the counties and not the Department.

Commissioner Poaster asked if this was the only statewide project not impacted by the Executive Order. Barbara Marquez responded that they are hoping to move forward with the SMI.

Commissioner Pating asked what kind of media or public relations efforts are being drafted around Suicide Prevention and are availability of previous services going to be considered? Barbara Marquez responded that there is a distribution plan in place and that further information will be made available at the April meeting of the American Society of Suicidology Conference in San Francisco and will be promoted. Commissioner Pating asked if we should promote the Student Mental Health Initiative now. Barbara Marquez said she is meeting with the education systems and will add this to the agenda.

Sheri Whitt stated that the media definition is included in the MOU with DMH, and, encouraged ideas to be sent. Commissioner Pating used Virginia Tech as an example for the importance of having a positive document for the Student Mental Health Initiative to showcase.

Barbara Marquez indicated they have a draft plan in place and that during this month and through next month they will go to various stakeholder groups to get input on the design and gather input and feedback.

Public Comment

- Paula Campinelli stated that MHSA dollars is going out of state and that we need to hire within California. Fifty percent of PEI dollars need to go into the hands of the client and family members.

XII. ACTION: MHSA Global Planning Estimates for FY 2009/10

Commissioner Greene presented fiscal updates for PEI and INN, and explained the motions that the Commissioners are being asked to vote on today. 1) Of the \$326 million in unreserved funding, approve \$60 million per year over five years and put it in the hands of the counties where the communities can be served. 2) Approve up to 25 percent of the two-year funding amount (FY 2008/09 and FY 2009/10) be used for the community planning process for the Innovation component.

He defined the statewide global planning estimates as the funding level estimate for counties. He further discussed the roles and responsibilities of the Committee and discussed the criteria for recommendation of the authorization of estimates for PEI and INN.

- ✓ Cash for 75 percent payment to counties
- ✓ Maximum funding for local services
- ✓ Promote sustainable level of service
- ✓ Consider county capacity

Commissioner Henning asked if we have money set aside for PEI. Carol Hood responded by saying the Department of Finance does revenue projections to make sure we have enough money. Every July 1st, 75 percent of that year's payment is for maximum funding for each service. The funding source is volatile but there is sustainability of services.

Carol Hood presented a power point explanation of the statewide global planning estimate. What: It is the statewide funding level made available to counties for a specific component for a specific fiscal year. The Commission does not get involved in the determination of how much each county receives, but, rather sets an overall amount of investment by fiscal year.

For CSS, the recommendation that the statewide funding level for FY 2009/10 be established at \$900 million. A \$250 million increase over FY 2008/09. Also, they are committed to reconvene in January 2009 to review new estimates. Can we do even more at this point? The feeling was that this is as far as we should go based on the information that we have; but, in January, when we have new estimates from the Department of Finance DMH can revisit. Uncommitted funds can be vulnerable even at the county level. We want to strive for simple rules and steady funding. By July 2010, there will be a prudent reserve of 50 percent of ongoing service funding.

No action is need by the OAC, but welcome input.

PEI – The statewide funding of \$330 million for FY 2009/10 is recommended. The dollars are currently beyond sustainable, but we are OK for five years, and during that time we will continue to monitor it. This includes \$60 million to spend down an existing balance over a five-year period. Because of the late start of PEI, some money had been built up. The FY 08/09 level is \$233 million – the recommendation is a significant increase.

Innovation – We are recommending that \$71 million statewide funding levels be established for FY 2008/09 and FY 2009/10. Twenty-five percent of the two-year amount can be used for CPP or development of the workplan. The expectation is to have significant community participation throughout the design, the development and evaluation, recognizing that this has costs.

Stephanie Welch addressed capacity issue. One of the challenges in developing capacity is that the WET funds were delayed and the IT/Cap Facilities funds were also delayed. Those two components were essential for infrastructure building but, the money still has not gotten out to the counties. That is one challenge. Need to develop contracts with communities and partners who have not worked with before. The CPP is wider and more challenging. This money is not sustainable, you must spend it, and at some point you may not be able to continue to support fund their program regardless of its effectiveness.

Vice Chair Poat wanted clarification on what he is being asked to vote on.

Mark Heilman, DMH, Policy Advisor, Community Services, explained the fiscal MHSA dollars for PEI. The DOF tax revenue projections for FY 2008/09 is where the dollar amount for PEI and INN comes from. We want to operate on a cash basis so these projections form the basis for the amounts to be released in FY 2009/10. He stated that the revenue is already in the bank to support the cash flow for FY 2009/10. The majority of funds are already in the bank to support these planning estimates. We want to ensure that we have 75 percent of the total planning estimate that will be distributed available on July 1st of the fiscal year in question.

Vice Chair Poat asked if the OAC is allocating more cash in the bank, and Commissioner Pating asked if the OAC is only approving funding for FY 2009/10, even though PEI is allocating dollars over five years. There is no allocation or decision beyond the five years. Mark Heilman responded “yes.” The \$60 million augmentation (PEI) is included in the planning estimate for the first year and there is consideration for revisiting an additional \$60 million augmentation for future years. At this time, the request is \$60 million for one year.

Mr. Heilman further explained in detail the process of reversion.

Commissioner Henning was concerned that the amount seems high, and would like to have discussion to revisit this amount at a future time. Pat Ryan explained that this amount is not for planning but for actual services.

For INN, Stephanie Welch, CMHDA, explained that counties may use up to 25 percent for planning, but do not have to use all of the amount. Any unused portion can be directed toward services. San Bernardino County Mental Health Director, Allan Rawland, stated his county did not use all of the available 25 percent of the available planning dollars for PEI, and rolled it back into services.

Commissioner Pating spoke to the pot of money as only five percent for PEI and five percent of CSS which is a much smaller amount. The policy for the INN is developed by, for and in the context of the community. The request has a different focus with regard to planning than CSS or PEI there may be additional expenses incurred with CSS and PEI plans which is a reason why the percentage may look a little bigger.

Commissioner Gould asked Carol Hood if there would be any changes in estimates due to the downturn in the economy. Carol responded that DMH feels the amounts were sustainable and explained what the next steps are in order for counties to receive the remainder of their PEI funds.

Sheri Whitt asked Carol Hood for confirmation that it was agreed that the fiscal group would reconvene in January after the fund projections were received and that information would be brought before the Commission. Carol responded affirmatively. The fiscal group will continue to meet and bring the most recent projection to the Commission in order to maintain current information.

Commissioner Poaster stated that the Mental Health Funding Committee will have a report at the next OAC meeting. He feels that it is important to know how the dollars are funded and how they are driving the entire mental health process.

Motion:

1. The Commission authorizes for FY 2009/10 PEI funding level of \$330 million.
2. The Commission authorizes for FY 2008/09 for INN, \$71 million.
3. The Commission authorizes for FY 2009/10 for INN, \$71 million.
4. The Commission authorizes up to 25 percent of INN funding to be used for community program planning.
5. The Commission requests a recommendation from the OAC Funding Policy Committee in January 2009 regarding any suggested changes to these funding levels based on the state's 2009 revenue projections.

Motion: Motion was made by Vice Chair Poat and seconded by Commissioner Greene. The motion was unanimously approved. No opposition. The motion is carried.

XII. Update from Attorney General on MHSOAC Activities

Shannon Chambers, Deputy Attorney General, has been assigned to the OAC to provide advice on legal matters. She gave a brief background of her experience and what her role will be with OAC. She will conduct annual training(s) for the Commissioners and the OAC staff on Bagley-Keene and Conflict of Interest.

Sheri Whitt indicated that she will be working with Ms. Chambers to draft a letter requesting an exemption for all MHSA contracts with an emphasis that State General Funds will not be impacted.

XIII. Commissioner Question and Answer Period on Various Reports

Commissioner Kahn stated that there were “rumors” that the state would borrow funds from First 5 and Prop 63. The Executive Director said she had heard the state may engage in a possible cash flow diversion. There is a clause in the trailer bill that loans cannot be used for what is intended in the MHSA.

Communication Report – Commissioner Vega stated that if we do not receive an exemption, then the OAC needs to know so a contingent plan can be developed.

XIV. Open Public Comment Period

- Stacie Hiramoto, REMHDCO, thanked the OAC, the Cultural & Linguistic Competence Committee and DMH for reaching out to REMHDCO to be included in the stakeholder process. An RFP was put out for reducing disparities, but, stakeholders want a separate RFP. A 6-fold model is needed.
- Walter Shwe indicated it should be more than an RFP. It should be a bottom up process. As the Vice Chair of the Mental Health Planning Council, he appreciates Commissioner Henning’s participation.
- Molly Brosso (sp?) representing community clinics and community health centers, echoed Ms. Hiramoto’s comments. She indicated her group sees the racial and ethnic community and project for reducing disparities as separate. It should be a 6-concept process. She encourages OAC and DMH to work closely with stakeholders.
- Arnulfo Medina, the 6 contract model by the Executive Director is good. Communities should be involved with a strategic plan.
- Rocco Cheng, Pacific Clinics, Los Angeles County, and REMHDCO, said reducing disparities should be a strategic plan. There should be six separate proposals instead of one because it would be a self-determination and empowering to each ethnic group. They do not need more people telling them what to do.
- Stephanie Welch, CMHDA, passed on comments for PEI, but on next month’s agenda, she would like to have an opportunity to review and comment on the MOU.
- Patty Gaynor, client advocate, wanted to know if there is a grievance process in place. She asked, “what if plans don’t come out the way stakeholders thought?” They are tired of excuses regarding not hiring clients.

- Peter Castle, California Association of Rehabilitation Agency, spoke of the necessity of peer support in the wellness and recovery centers. He indicated that they are being asked to extend their resources beyond what they can do. There is a call for standards to be developed. Commissioners, please keep the standards in mind as we go forward with the MHSA development plans so the consumer organizations can effectively do their jobs. Standards for wellness recovery standards whether it be training or operating standards. CASMA(sp?) is currently working on developing wellness recovery standards.
- Vaness Aquina, Latino Coalition, REMHDCO, is encouraged by the work of the statewide programs. She supports the 6-point model to get dollars back into the communities to empower them.

XV. Review of Proposed Agenda for October 2008 Meeting

Chair Gayle asked if there were any comments on the October agenda.

Vice Chair Poat suggested that the objectives for the COD be voted on at the next month's meeting. However, Vice Chair Poat felt he wanted to see an action plan that included objectives and less reporting. Vice Chair Poat said he was more interested in directions and suggested 2 or 3 items regarding affecting the course of the State Plan and describe what are substantive actions.

Sheri Whitt explained the rationale for the next month's agenda items for COD.

Commissioner Henning felt it was fine with him to vote on the COD now in order to move it along.

Commissioner Trujillo respects the comments and said that the language that addresses cultural and ethnic diversity should be incorporated.

Stephanie Welch, CMHDA, said they will be meeting with ADP and will be ready to make recommendations at the next meeting.

Commissioner Kahn indicated and, procedurally, if something is labeled as a report, there is hesitation to take action on it.

Commissioner Gould indicated it was suggested that the revised COD report be reviewed by the Cultural and Linguistic Competency Committee, but, there is not enough time. Perhaps comments can flow through Commissioner Trujillo and work with the COD Committee to input comments.

Commissioner Trujillo addressing Stacie Hiramoto, suggested sending comments to the COD Committee and then we can have a conference call.

The COD Report is available on line as well as in today's packet.

XVI. Adjournment

Chair Gayle adjourned the meeting at 4:35 p.m.

.